## FOLLOW-UP TRAINING QUESTION

Please check the box next to the area that is related to your question:

<b>Q</b> 1	UESTION
	_] General Information
[	_] Rates
[	_] Performance Reports
[	_] Cost Reports
[	_] County or Direct Provider Contracts
[	_] Audits
[	_] Title 22/D/MC Regulations
[	_] Title 9/NTP Regulations
[	_] D/MC Billing (Technical on Automation)
L	_] D/MC Billing (Completion and/or Submission)

Name of Dout				
name of Parti	cipant:			
		_		
Name of Prov	ider Organizati	ion:		

## HOTLINE FOR AB 2071 IMPLEMENTATION

- \* D/MC Billing (Completion and/or Submission)
- \* D/MC Billing (Technical on Automation)
- \* Title 9/NTP Regulations
- \* Title 22/D/MC Regulations
- \* Audits
- \* County or Direct Provider Contracts
- \* Cost Reports/Performance Reports
- \* Rates

## \* General Information

## HOTLINE NUMBER IS (916) 323-0447

When calling the Hotline, please leave the following information:

- Your Name
- Your Provider Organization
- Date and Time Telephoned
- Telephone Number and Fax Number
- Question

The Hotline has been designed in such a way that your telephone call will be returned within 24 hours of being placed; however, it is not guaranteed that an answer to your question will be provided. Staff will respond by stating that they are researching the issue and will respond as soon as an answer is available.